

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

FILED

PLAINTIFF Corazon S. Pascual	COURT CASE NUMBER C-08-2906-SBA
DEFENDANT Michael J. Astrue, Commissioner of Social Security Administration	TYPE OF PROCESS ***see below

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Michael J. Astrue, Commissioner of Social Security Administration
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
6401 Security Blvd., #611, Baltimore, MD 21235-0001

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Corazon S. Pascual P.O. Box 471454 San Francisco, CA 94147	Number of process to be served with this Form 285	<p>RECEIVED UNITED STATES MARSHAL 2008 JUL 11 AM 10:37 NORTHERN DISTRICT OF CALIFORNIA - OAKLAND</p>
	Number of parties to be served in this case	
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

ENTERED

***summons & complaint
docket #s 2,3 & 6

Signature of Attorney or Originator requesting service on behalf of: <i>Chas. Pierce</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 510-637-3530	DATE 7/8/08
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>11</u>	District to Serve No. <u>11</u>	Signature of Authorized USMS Deputy or Clerk <i>Hima</i>	Date <u>7/17/08</u>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode				
Address (complete only different than shown above)	<table border="1"> <tr> <td>Date <i>see below</i></td> <td>Time <input type="checkbox"/> am <input type="checkbox"/> pm</td> </tr> <tr> <td colspan="2">Signature of U.S. Marshal or Deputy <i>Hima</i></td> </tr> </table>	Date <i>see below</i>	Time <input type="checkbox"/> am <input type="checkbox"/> pm	Signature of U.S. Marshal or Deputy <i>Hima</i>	
Date <i>see below</i>	Time <input type="checkbox"/> am <input type="checkbox"/> pm				
Signature of U.S. Marshal or Deputy <i>Hima</i>					

Service Fee <u>\$8.00</u>	Total Mileage Charges including endeavors <u>-</u>	Forwarding Fee <u>-</u>	Total Charges <u>\$8.00</u>	Advance Deposits <u>0</u>	Amount owed to U.S. Marshal* or (Amount of Refund*) <u>\$0.00</u>
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REMARKS: *Mailed a copy on 7/17/08 by Certified Mail.
Received acknowledgment on 8/1/08*

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00

AO 440 (Rev. 03/08) Civil Summons

UNITED STATES DISTRICT COURT

for the

Northern District of California

Corazon S. Pascual

Plaintiff

v.

Michael J. Astrue, Commissioner of Social Security

Defendant

Civil Action No. C-08-2906-SBA

Summons in a Civil Action

To: (See attached)

(Defendant's name)

A lawsuit has been filed against you.

Within 60 days after service of this summons on you (not counting the day you received it), you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff's attorney, whose name and address are:

Corazon S. Pascual

P.O. Box 471454

San Francisco, CA 94147

If you fail to do so, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Richard W. Wieking

Name of clerk of court

Date: 07/08/2008

Deputy clerk's signature

(Use 60 days if the defendant is the United States or a United States agency, or is an officer or employee of the United States allowed 60 days by Rule 12(a)(3).)

C-08-2906-SBA Pascual -v- Astrue

Michael J. Astrue
Commissioner of Social Security Administration
6401 Security Blvd., #611
Baltimore, MD 21235-0001

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450 Golden Gate Avenue
P.O. Box 36055
San Francisco, CA 94102

U.S. Attorney General
U.S. Dept. Of Justice
950 Pennsylvania Ave., NW
Washington, DC 20530